

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2007</h2>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 10/660,141	Filing Date September 11, 2003
TOTAL AMOUNT OF PAYMENT (\$) 1020.00		First Named Inventor Sebastien Perrot	Examiner Name Anthony S. Addy
Art Unit 2617		Attorney Docket No. PF030065	

METHOD OF PAYMENT (check all that apply)		CUSTOMER NUMBER: 24498	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: THOMSON LICENSING LLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description	Small Entity		Small Entity		Small Entity		Fees Paid (\$)
Each claim over 20 (including Reissues)	50	25					_____
Each independent claim over 3 (including Reissues)	200	100					_____
Multiple dependent claims	360	180					_____
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
_____ - or HP = _____	x	\$50	=	\$			
HP = highest number of total claims paid for, if greater than 20.							
Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
_____ - or HP = 0	x	\$200	=	0			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	= _____			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)				Fees Paid (\$)			
Other (e.g., late filing surcharge): FEE FOR THREE MONTH EXTENSION - \$1020.00				\$1020.00			

SUBMITTED BY					
Name (Print/Type)	CATHERINE A. FERGUSON	Registration No. (Attorney/Agent)	40,877	Telephone	(609) 734-6440
Signature	<i>Catherine A. Ferguson</i>			August 15, 2007	